PART B -FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571) 273-2885

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appropriate. All further corre- as indicated unless corrected I for maintenance fee notification	pelow or directed ons.	l otherwise in Blo	ck 1, by (a) specifying a n	tion of maintenance fees wi ew correspondence address;	Il be mailed to the cu and/or (b) indicating	rrent correspondence address a separate "FEE ADDRESS"	
CERRENT CORRESPONDENCE ADDRESS Poater Use Black 1 for any change of address) 30678 CONNOLLY BOVE LODGE & HUTZ LLP 1878 Eye Street, N.W. Suite 1100 Washington, D.C. 20006				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE IFE address above, or being facsimile transmitted to the USPTO (57) 127-328/S, on the date indicated below.			
						(Depositor's name)	
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L DESTRUCTION AND	ER DIG DATE		THE THE PUT	TOP ATTOON	THE DOCUMENTS	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN Louise Edwards		EY DOCKET NO.	CONFIRMATION NO.	
10/588,702	03/13/2007				52-14300-US	2415	
TITLE OF INVENTION:	ADDITION: ANTAGONI		YCYCLIC COMPOUND	S AND THEIR USE AS MI	ETABOTROPIC GLU	JTAMATE RECEPTOR	
APPLN. TYPE SMA	LL ENTITY	ISSUE FEE	PUBLICATION FEE	PREV. PAID ISSUE FEE	TOTAL FEE(S) D	UE DATE DUE	
Non-Provisional	no	\$0	\$0	\$1510.00	\$0	07/05/2011	
EXAMINER		ART UNIT	CLASS-S	UBCLASS]		
G. M. Shameen		1622		40000			
1. Change of correspondence address or indication of "Fee Address" of TeR 1.3G3. Address" of TeR 1.3G3. Change of correspondence address for Change of Correspondence Address from PTO/SBI/122 attached. The Address' indication for "Fee Address" Indication for The Address' Indication for Ind			attorneys or agents OR, (2) the name of a single a registered attorney or up to 2 registered paten name is listed, no name	to 3 registered patent alternatively, firm (having as a member agent) and the names of t attorneys or agents. If no will be printed.	Connolly Bov	e Lodge & Hutz LLP	
	n assignee is ide in 37 CFR 3.11	ntified below, no	assignee data will appear o nis form is NOT a substitut	on the patent. If an assignee		e document has been filed	
AstraZeneca AB Södertälje, S				, Sweden			
Please check the appropriate ass	ignee category or c	ategories (will not b			ration or other private go	sup entity Government	
4a. The following fee(s) are enclosed:			4b. Payment of Fee(s):				
Issue Fee			A check in the an	A check in the amount of the fee(s) is enclosed.			
Publication Fee (No	small entity disc	ount permitted)	Payment by credi	t card. Form PTO-2038 is a	ttached.		
Advance Order -# of	Copies		X The Director is he Deposit Account	ereby authorized by charge t Number 03-2775	the required fee(s), or	credit any overpayment, to	
5. Change in Entity Status	(from status ind	icated above)	_				
a. Applicant claims	SMALL ENTITY	status. See 37 C	FR 1.27. b. Appli	cant is no longer claiming S	MALL ENTITY state	us. See 37 CFR 1.27(g)(2).	
The Director of the USPTO is r NOTE: The Issue Fee and Publ interest as shown by the records	ication Fee (if rec	quired) will not be	accepted from anyone other				
Authorized Signature /Sejal R. Gosalia/			R. Gosalia/	Da	ite Jun	e 30, 2011	
Typed or printed name	Sejal R. Gosalia			Reg	gistration No.	66,611	